

FILED
Mar 09, 2006 8:00 am
Secretary of State

02-21-2006 90024 008 ***150.00

2/2

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P04000102508
1. Entity Name

EYE IN THE SKY INVESTIGATIONS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4708 MERLIN CR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
DADE CITY, FL

City & State

4. FEI Number
75-3160397

Applied For
Not Applicable

Zip
33523

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

66004420

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

CASSANDRA SELVAGE

Street Address (P.O. Box Number is Not Acceptable)

4708 MERLIN CR.

City

DADE CITY

FL

Zip Code

33523-9176

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Cassandra Selvage

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/15/06

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
CASSANDRA SELVAGE
4708 MERLIN CR.
DADE CITY, FL 33523-9176

TITLE
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cassandra Selvage

CASSANDRA SELVAGE, PRESIDENT

2/1/2006

352-797-0374

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



ATTACHMENT

#66004420

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2006

EYE IN THE SKY INVESTIGATIONS INC.
4708 MERLIN CIRCLE
DADE CITY, FL 33523

Subject: **EYE IN THE SKY INVESTIGATIONS INC.**

Reference Number: **P04000102508**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm

ANNUAL REPORTS SECTION